An essay on

Diagnosis

Respectfully submitted

to the Faculty of the

Homoeopathic Medical College

of Pennsylvania

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one thousand, eight hundred and fifty two

by

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Diagnosis.

In commencing my Thesis upon the subject of Diagnosis, I am well aware that I shall add but few if any new ideas to the accumulation of facts upon this important branch of our profession.

Yet, as it is a subject of the greatest importance, the stepping stone to the successful practitioner, as it is a point which will ever be the great line of demarkation between the scientific physician and the ignorant impostor, it can not be too highly regarded nor too perseveringly studied.

It opens to us a fair and honorable source of credit and reputation, and it begets a degree of confidence towards us which is beneficial, not merely to ourselves but to our patients.

Dealing as the Homoeopath does

with "remedies whose operations are specific, acting directly on individual parts of the body", the most minute acquaintance with the characteristic signs of a disease that can be acquired is necessary to the success of his treatment, which in every case is founded on the similarity that can be recognized between the pathogenetic effects of the remedies he employs, and the conditions of the disease he wishes to remove.

Observation, reflexion and experience, have convinced us that the best and only true theory of cure is based on natures unchanging law, "Similia Similibus Curantur"

Hahnemann was preeminently a vitalist, and those who have preceded

him have held the vivifying principle of life in no dearer estimation, still, at the same time he manifests the most perseving anxiety that every change which takes place in each particular organ should be carefully investigated.

The Alopath prescribes more for the name of a disease. They employ a routinum of treatment such as Emetics, Cathartics, Blistering, Bleeding &c.

A victim of their practice is drugged and drugged until the symptoms of the orignal disease are so intimately commingled with the chaos of drug symptoms, that it is impossible to discriminate the true type.

For example let us examine for a moment their palliative treatment.

A patient suffering from some

affection receives a narcotic, which completely draws a veil over the face of his real disease.

When the stupefying effect has passed away, we have the original disease rendered infinitely more complicated by the secondary effect of the drug.

Nothing is now left but to readminister the temporary, soothing, but deceitful poison again.

Not that drugs never produce a cure, for they are occasionally successful sometimes, especially when they use their "short anchors" which upon ascertaining their pure pathogenesis will be found subject to the law "Similia" rather than to "contraria"

Thus I have attempted to show that a correct and minute Diagnosis is of

much greater importance to us, than to the disciple of the old school.

The word Diagnosis is derived from the two Greek words "δια and γινοσκω" which signifies the discrimination of the signs of disease.

All the signs we have of disease are the symptoms, of which the human economy in its normal state is void.

Symptoms may be considered as resembling so many words, which, when taken seperately or when put together at random have no force nor signification, but, arange them in due order, reduce them into a sentence and they convey a meaning or an expresion of something which is thus revealed. Symptoms then become signs when their import can be interpreted.

Suppose a crackling sound is he-

and in some part of a patients lung, by the ear applied outside his thorax - The sound is a symptom and denotes the unnatural presence of a fluid in the lung and the passage of air through that fluid.

The fluid may be serum, mucus, pus, or blood: we cannot tell by the sound alone which of these it is. But if we learn that the person in whose lung the sound is audible has been ill for a day or two only, that he has pain in his chest, cough, embarrassed breathing, and fever, we conclude that he is laboring under that serious disease inflamation of the lung.

The crackling sound alone could not assure us of this; nor without the addition of this sound could the pain, the laboured breathing, the cough, or the fever. Taken collectively, the symptoms

constitute a Diagnostic sign, and reveal the existence of pneumonia.

In all cases when the condition of the patient will permit he should be desired to relate his symptoms minutely care being taken that he may not be interrupted so as to interfere with his own peculiar expressions or phrases.

During his statement the practitioner must be attentively engaged in listening to and writing down the patients symptoms and at the same time closely observing any changes that may take place.

When the patient has finished all he has to communicate it is necessary to interogate him with a view to complete each individual symptom already noted down.

This mode of examination however must be very guarded avoiding all

technical terms and the "questions must be so formed as never to suggest the reply."

As a general rule the friends of the patient should be questioned upon the observations they have made, of what he may have complained, and how he may have acted.

We should learn his occupation to see if that be an exciting cause, the location of his residence, for the purpose of learning whether there is a miasmatic influence, the climate hereditary decent, constitutional peculiarities, temperament, age, sex, diet, and all accidental circumstances which may act as predisposing agents.

It is also desirable that the physician should know whether the patient has been under previous medical treatment, that he may ascertain whether any of the symptoms are the result of that treatment, or whether

they were experienced previous to the exhibition of medicine.

It is also very important in these inquiries to ascertain the moral symptoms, whether the patient be irritable, passionate, violent or mild, lively or melancholy, anxious or indifferent, whether he has fear of death, or a desire to commit suicide.

The physician should observe the effect produced by position, such as sitting, lying, standing or moving about either within doors or in the open air.

Each of these morbid tendencies will denote a peculiarity in the patient which calls for minute attention and which forms an important item for consideration in determining on the remedy.

Many valuable signs may be observed in the face of a patient indicating the seat

and character of a disease: Viz- dilation of the nostrils, quick breathing, contracted features and anxious expression, form a group of symptoms which the Dr. would recognize as an acute inflamation of the respiratory organs.

Sharp features with pale countenance, hollow cheeks, expression of anguish, lips of a bluish color and dry, forehead corrugated, brows knit, are the visable signs of acute inflamation of the abdominal viscera.

Hurried and difficult inspiration, with comparatively easy expiration, face swollen and livid, all symptoms agravated by lying down, indicate Hydrothorax.

Flushed and excited or dull and stupid expression of countenance, eyes red and brilliant or dull and heavy, with pupils

contracted or dilated, wild expression, twitching of the muscles of the face, indicate inflamation of the cerebrum.

Rapid respiration, eyes and face red, pulse quick and strong, indicate fevers.

Various and full of meaning is the condition of the pulse, and the appearances presented by the tongue.

A patient would think his physician careless, or ignorant of his profession, if he did not at every visit, look at his tongue as well as feel his pulse.

In the treatment of infants and children we are guided allmost entirely by peculiar etenal signs.

For instance accelerated breathing and expansion of the nostrils in pulmonary affections; fever short dry cough, constipation or diarrhea in dentition;

crowing sound in croup; peculiar color of countenance, bad smelling breath, grinding of the teeth, picking and boring at the nose, characteristic stools &c. in verminous diseases; intolerance of light, sensibility to noise, heavy sleep, redness and swelling of the face, boring of the head in the pillow in cerebral affections; drawing up of the legs, screaming on being touched in various abdominal diseases.

In short, nothing should be omitted that might throw light upon a complicated and dangerous case, in as much as many circumstances seemingly unimportant of themselves, are valuable to the Homœopathic physician.

Thus I have given but an imperfect sketch on this important subject

It deserves more time and consideration than I have to bestow upon it at the present, and it is with great diffidence that I present it for consideration.